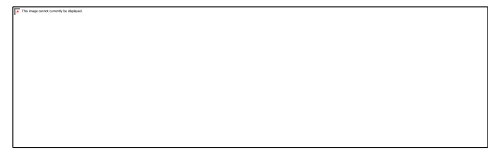




The Future of Regulation CQC Regulatory Framework – New Methodology

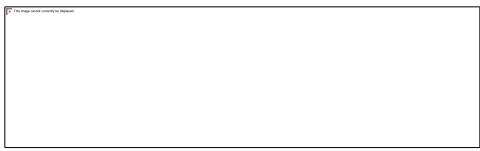
**Elaine Jeffers, Deputy Director of
Governance & Quality Improvement
May 2017**



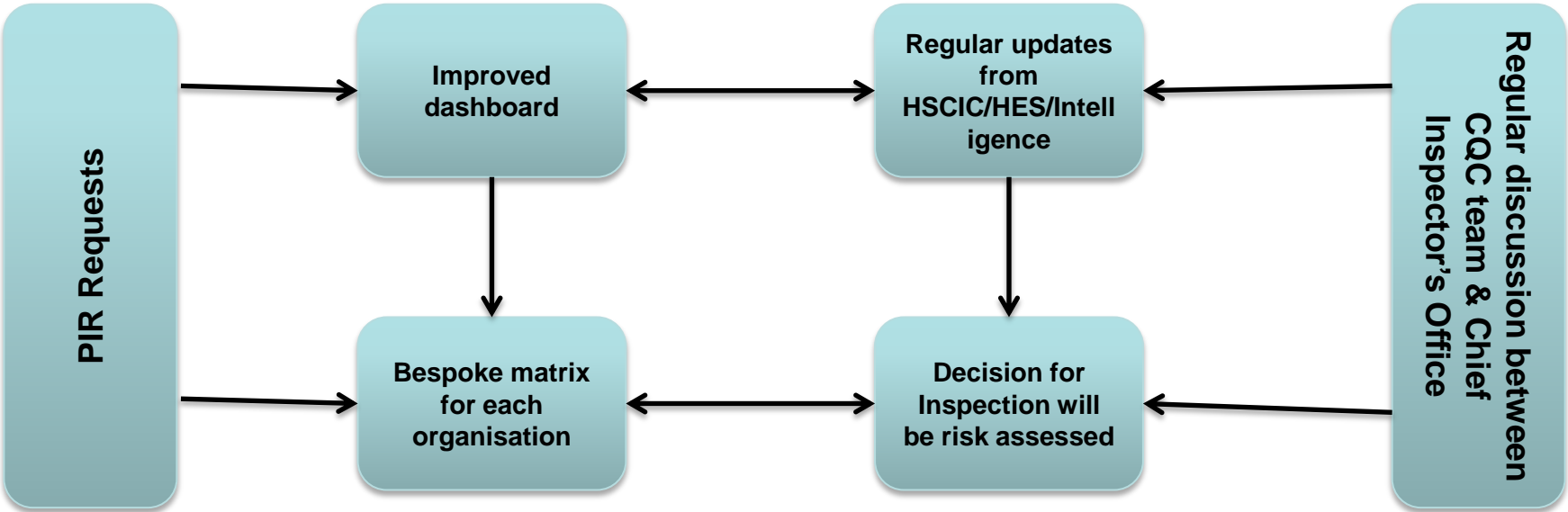
Do a good job everyday

Everyday could be the day!!



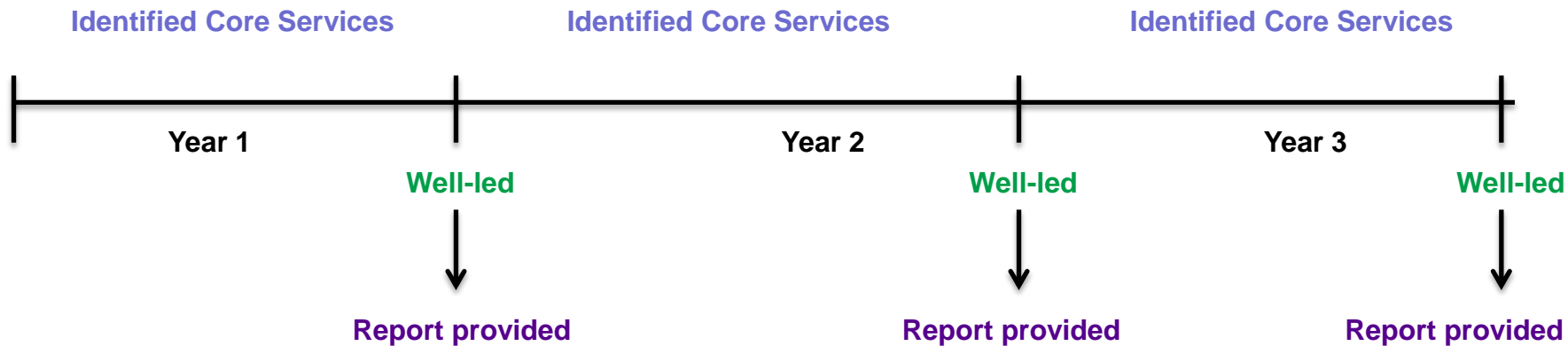


Regulation Methodology



Greater focus on listening to the public

Moving to a 3 year Inspection Cycle



For Core Service & Well-led Inspections – new ratings will be given

New ratings will build on current rating grid but will remain subject to the overall aggregation tool

Additional Responsive (announced/unannounced) visits will be called at any time as intelligence directs

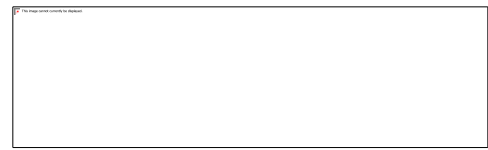
Core Services

- Urgent & Emergency Services
- Medical Care, including Older Persons Care
- Surgery
- Critical Care
- Maternity
- Gynaecology (likely to be inspected in conjunction with Surgery)
- Children & Young People
- End of Life Care
- Diagnostics (focus on interventional diagnostics)
- Outpatients
- Oncology (Cancer Centres only – Chemotherapy to be inspected in conjunction with Medical Care)

Key Lines of Enquiry (KLOEs) being developed for Mental Health (Acute Trusts) in 2018

Focus of Inspections

- Will ensure that the Trust is providing appropriate care for the Local Population
- Will continue to assess against 5 key domains
- Will instigate a 'Responsive Visit' on receipt of specific intelligence or concern (Trust will not be re-rated or receive a formal report but will receive immediate feedback)
- Will trigger a visit where there is a breach or potential breach of licence



Additional information

- No longer requirement for a formal wider stakeholder Quality Summit on publication of a Report
- Where concerns have been raised may request a Quality Summit at a point post the Inspection to ensure system-wide progress and support
- New Guidance for Providers will be issued post election
- Never Event categorisation under review with much harsher approach to be taken